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Substitute for Form PTO-875									11/1/7/0		
CLAIMS AS FILED — PART I (Column 1) (Column 2)							SMALL ENTITY		OR	OTHER SMALL	
	FOR	NUMBE	R FILED	NUMBER	R EXTRA		RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))						\$	OR		770		
TOTAL CLAIMS (37 CFR 1.16(c))  minus 20 =				/		'x s=		OR	x s_/8=	36	
INDE	INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = ' /					x \$=		OR	× \$_86=	86	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+s =		OR.	+ \$=	
* If the difference in column 1 is less than zero, enter *0* in column 2.							TOTAL		OR	TOTAL	892
_		AIMS AS AME		- PART II				- 171777	OR		RTHAN
4	TOOY (	(Cotamn 1)		(Column 2)	(Column 3)	1	SMALL E	NILLA	Ì	SMALL	ENTITY
AT.		REMAINING AFTER		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- FEE
AMENDMENT	Total (37 CFR 1.16(c))	00	_Minus	22	- A		x \$=		OR	x \$	
	Independent (37 CFR 1.16(b))	· 4	Minus	- 4 1			x \$		OR	x \$=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ \$/_=		OR	<del>1/</del> \$=	
							ADD'L FEE		OR	ADD'L FEE	L
		(Column 1)		(Column 2)	(Column 3)		<del></del>		ī		
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA- FEE
AMENDMENT	Total (37 CFR 1.16(c))	•	Minus	•	=		x \$=		OR	x s=	
	Independent (37 CFR 1.16(b))	•	Minus	***	=		x \$=		OR	x \$=	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+\$=		OR	+ \$ =	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
ľ		(Column 1)		(Column 2)	(Column 3)	_					
NTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI TION/ FEE
ME	Total (37 CFR 1.16(c))	•	Minus	**	=		x \$=		OR	x \$=	
S	Independent (37 CFR 1.16(b))	•	Minus	***	=		x \$=		OR	x \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+5 =		OR	+ \$ =	
AMENDMEN	FIRST PRESENT	ATION OF MULTIPL	E DEPENDI	311 CO 4 M (31 C			1 ' 0 -				

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and t USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete undergraphing, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any common the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. 1 and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.